LEGISLATIVE RESOURCE CENTER

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UNITED STATES HOUSE OF REPRESENTATIVES CALENDAR YEAR 2011 FINANCIAL DISCLOSURE STATEMENT	ENT	Form A For use by Members, officers, and employees	2012 MAY 15 PM 4: 16	PH 4: 16	ge i of 1
Name: James David Matheson	Daytime	Daytime Telephone: 202-225-3011 U DELIVERED	HC DE	HAND DELIVERE	Ü
Filer Status Member of the U.S. State: U.T. House of Representatives District: 2 Amendment	Officer or Employee	ee Termination Date:	A \$200 penalty shall be assessed against anyone who files more than 30 days late.	y shall be a	assessed nore than
PRELIMINARY INFORMATION — ANSWER EACH OF THESE	F THES	E QUESTIONS	i		
I. Did you or your spouse have "earned" income (e.g., salaries or fees) of \$200 or more from any source in the reporting period? If yes, complete and attach Schedule I. Yes	S □	VI. Did you, your spouse, or a dependent child receive any reportable gift in the reporting period (i.e., aggregating more than \$350 and not otherwise exempt)? If yes, complete and attach Schedule VI.	eceive any egating more	Yes	× X
II. Did any individual or organization make a donation to charity in lieu of paying you for a speech, appearance, or article in the reporting period? If yes, complete and attach Schedule II.	₹	VII. Did you, your spouse, or a dependent child receive any reportable travel or reimbursements for travel in the reporting period (worth more than \$350 from one source)? If yes, complete and attach Schedule VII.	receive any the reporting ?	Yes	No
III. Did you, your spouse, or a dependent child receive "unearned" income of more than \$200 in the reporting period or hold any reportable asset worth more than \$1,000 at the end of the period? If yes, complete and attach Schedule III.	<u>\$</u>	VIII. Did you hold any reportable positions on or before the date of filing in the current calendar year? If yes, complete and attach Schedule VIII.	before the date	Yes	No.
IV. Did you, your spouse, or a dependent child purchase, sell, or exchange any reportable asset in a transaction exceeding \$1,000 during the reporting period? If yes, complete and attach Schedule IV.	<u>\$</u>	IX. Did you have any reportable agreement or arrangement with an outside entity? If yes, complete and attach Schedule IX.	rangement with	es —	₹
V. Did you, your spouse, or a dependent child have any reportable liability (more than \$10,000) during the reporting period? Yes If yes, complete and attach Schedule V.		Each question in this part must be answered and the appropriate schedule attached for each "Yes" response.	ust be answ d for each "	vered and Yes" respo	the ynse.
EXCLUSION OF SPOUSE, DEPENDENT, OR TRUST INFORMATION — ANS	NFOR	WER	EACH OF THESE QUESTIONS	JESTIONS	
EXEMPTION —Have you excluded from this report any other assets, "unearned" income, transactions, or liabilities of a spouse or dependent child because	income, tran	sactions, or liabilities of a spouse or dependent c	nild because]	
may meet an unee tests for exemption: Do not answer yes unless you have met consumer with the committee on E	i consumo	WILL THE COLUMN TO THE COLUMN			D

Name James Matheson

SCHEDULE I—EARNED INCOME

List the source, type, and amount of earned income from any source (other than the filer's current employment by the U.S. Government) totalling \$200 or more during the preceding calendar year. For a spouse, list the source and amount of any honoraria; list only the source for other spouse earned income exceeding \$1,000. See examples below.

Exclude: Military pay (such as National Guard or Reserve pay), federal retirement programs, and benefits received under the Social Security Act.

Course	The second critical and committee of the second critical and secon	Conny Act.
	Type	Allionit
	Approved Teaching Fee	\$6,000
	Legislative Pension	\$9,000
Civil War Roundtable (Oct. 2nd)	Spouse Speech	\$1,000
ion	Spouse Salary	NA
University of Utah	Spouse Salary	NA
		i

SCHEDULE III—ASSETS AND "UNEARNED" INCOME
ASSETS AND
"UNEARNED"
INCOME

Name JAMES Matheson

TIJAXA Moderate Plus Allocation	[1] AXA Modonte Allocation	Insurance Municiple Life	Coin Collection	Barun Partners Multa	Alpine Dynamic Orividend	JT 1st Bank of Paducah, KY Accounts	. –	SP, SP Mega Corp. Stock	Exclude: Your personal residence, including second homes and vacation homes (<i>unless</i> there was rental income during the reporting period); any deposits totaling \$5,000 or less in a personal checking or saving accounts; and any financial interest in, or income derived from, a federal retirement program, including the Thritt Savings Plan. If you so choose, you may indicate that an asset or income source is that of your spouse (SP) or dependent child (DC), or is jointly held with your spouse (JT), in the optional column on the far left. For a detailed discussion of Schedule III requirements, please refer to the instruction booklet.	For an ownership interest in a privately-held business that is not publicly traded, state the name of the business, the nature of its activities, and its geographic location in Block A.	For rental or other real property held for investment, provide a complete address.			Provide complete names of stocks and mutual funds (do not use ticker symbols.)	the end of the reporting period, and (b) any other reportable asset or sources of income which generated more than \$200 in "unearned" income during the year.	production g \$1,000 at	Asset and/or Income Source	BLOCK A
X	*		×	×	*	×	Indefinite	X	None \$1 - \$1,000 \$1,001 - \$15,000 \$15,001 - \$50,000 \$50,001 - \$100,000 \$100,001 - \$250,000 \$250,001 - \$500,000 \$500,001 - \$1,000,000 \$1,000,001 - \$5,000,000 \$5,000,001 - \$50,000,000 \$25,000,001 - \$50,000,000 Over \$50,000,000			A B C D E F G H I J K L	year and is included only because it generated income, the value should be "None."	If an asset was sold during the reporting	method other than fair market value, please specify the method used.	Indicate value of asset at close of	Value of Asset	вгоск в
*	*		*	×	×	×	Royalties	X	NONE DIVIDENDS RENT INTEREST CAPITAL GAINS EXCEPTED/BLIND TRUST TAX-DEFERRED Other Type of Income (Specify: e.g., Partnership Income	or Farm Incor	me)		gains, even it reinvested, must be disclosed as income. Check "None" if the asset generated no income during the reporting period.	Dividends, interest, and capital	you to choose specific investments or that generate tax-deferred income (such as 401(k) plans or IRAs), you	Check all columns that apply. For retirement accounts that do not allow	ncome	BLOCK C
*	*		>	X	*	×	X	X	None \$1 - \$200 \$201 - \$1,000 \$1,001 - \$2,500 \$2,501 - \$5,000 \$5,001 - \$15,000 \$15,001 - \$50,000 \$50,001 - \$100,000 \$100,001 - \$1,000,000 \$1,000,001 - \$5,000,000 Over \$5,000,000				earned or generated.	reinvested, must be disclosed as	"None" column. For all other assets, indicate the category of income by checking the appropriate box below. Dividends ,	For assets for which you checked "Tax- Deferred" in Block C, you may check the	Amount of Income	BLOCK D
P	Ф				0		-	S (partial)	m so to some	follows: (S) (partial) See below	sold, please		yea	reporting	(P), sales (S), or exchanges (E) exceeding	asset had purchases	Indicate if the	BLOCK E

None	BLOCK A Asset and/or Income Source	BLOCK B Year-End Value of Asset	B nd Asset	of I	BLOCK C Type of Income	BLOCK D Amount of Income
None S1 - S1,000 S25,000 S25,000 S25,000 S25,000,001 S1,000,000 S1,000,001 S1,000,001 S25,000,001 S25,000,001 S25,000,000 S25,000,001 S25,000,000 None S1,000,001 S1,000,000 None None S1,000,000 None None S1,000,000 None None S1,		ВС	<u>~</u>			
None \$1 - \$1,000 \$1,001 - \$15,000 \$1,001 - \$250,001 - \$100,001 - \$250,000,001 - \$		000	00,000 ,000,000 5,000,000 50,000,000		ND TRUST) come	
None St - St		1 - \$15,000 01 - \$50,000 01 - \$100,00 001 - \$250,0	001 - \$1,000 0,001 - \$5,0 0,001 - \$25, 00,001 - \$50	ENDS	PTED/BLING DEFERRED Type of Inco ify: e.g., ership Incom	
elity Funds et Manager 50% anced Fund L Reserves Non-tend Multimation on tend Multimation of Prized Stock I Cap Piscovery tau US Equity Tau US Equity The US Equity The Discovery fund A CREF Funds A CREF Funds A CREF Funds A CREF Funds		\$1 - \$1,001 \$15,00 \$50,00 \$100,0	\$500,0 \$1,000 \$5,000 \$25,00	DIVIDE RENT INTER	TAX-DI Other 1 (Special Partner	\$1 - \$2
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entand Aultination I am Find 2035 I am Fiscovery I Cap Piscovery Tan Us Equity Tan Us Equity A counce PUE 2015 Pull Bruesbritout Comm Stock	Cash Reserves	×		×		×
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comm Stock A CREF Fun a cycle 2035	Juves be	X		X		
7°	comm Stock	×		×		
Lifecycle 2035 X X	1					
	Lifecycle 2035	X		X		×

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Asset and/or Income Source		Vanguard Funds	Emekajng Markett Like	Small Cap Stock J	Wasatch Miero Cap	mk (Account			and the second s					
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D.	−\$1,000 Œ										ļ				1
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Year-End Value of Asset	0,001 – \$100,000 ^{III}									1	1				
	00,001 – \$250,000		_								_				1
BLOCK B Year-End ue of As	50,001 – \$500,000 ග												 		1
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- %	,000,001 - \$5,000,000 -												 		1
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5	5,000,001 - \$50,000,000 - ベ														1
<u>- </u>	rer \$50,000,000														
	DNE				X										
7	VIDENDS		$\langle \nabla$	X											1
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75,78	APITAL GAINS														1
BLOCK C Type of Incom	(CEPTED/BLIND TRUST														
	X-DEFERRED														
	her Type of Income pecify: e.g., rtnership Income or rm Income)														
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BLOCK D Amount of Income	,001 - \$2,500 <														1
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	er \$5,000,000		+	1 1		+	- - -	 -		† †	1-	<u> </u>	 		†
BLOCK E	மு மே		0		P										

SCHEDULE IV— TRANSACTIONS

Name James Matheson Page 6 of 11

Report any purchase, sale, or exchange transactions by you, your spouse, or dependent child during the reporting period of any security or real property, hald for investment that exceeded \$1,000 include transactions that	Type of Transaction	ction		Date			Amount		와	of Transaction	ectio	<u> </u>		
resulted in a capital loss. Provide a brief description of any exchange trans- action. Exclude transactions between you, your spouse or dependent chil-				(MO/DAY/YR)	>	0	n	0	m	TI	စ	Ι	-	۲
dren, or the purchase or sale of your personal residence, unless it generates rental income. If only a portion of an asset is sold, please so indicate (i.e., "partial sale"). See example below.	HASE	ANGE		or Quarterly, Monthly, or			0	0	0	000	000	000		,000
Capital Gains — if a sales transaction resulted in a capital gain in excess of \$200, check the "capital gains" box and disclose this income on Schedule III.	PURC	EXCH	Check I Gain Ex	Bi-weekly, if applicable	\$1,001- \$15,000	\$15,001 \$50,000	\$50,001 \$100,000	\$100,00 \$250,00	\$250,00 \$500,00	\$500,00 \$1,000,0	\$1,000,0 \$5,000,0	\$5,000,0 \$25,000, \$25,000	\$50,000 \$50,000 Over	\$50,000
SP, DC, JT Asset														
Example: Mega Corpo	×			10-12-11		×							_	Ц
Albino Pynamic Dividoud Fund	×			Various dend	X									
				River+							:			
Equitable Life Insurance Fund	•													
-AXA Moderate Allocation	×			Verious J	×								I	
-AXA Moderate Plas Allocation	×			Remoest	メ									<u> </u>
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Fidelity Funds														
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				Plus Jud									<u> </u>	
	·			Reinvest										
- Expurt and Multinational	×			11-22-21	X									
(partial sale)														
- Freed om Fund 2035	×			Semialu	X									
				Druston 1		-			<u> </u>					
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SCHEDULE IV- TRANSACTIONS

Name James Matheron Page Zotll

Report any purchase, sale, or exchange transactions by you, your spouse, or dependent child during the reporting period of any security or real prop-	Type of Transaction	ction		Date			mo	Amount of	# Tr	Transaction	iion		
resulted in a capital loss. Provide a brief description of any exchange trans- action. Exclude transactions between you, your spouse or dependent chil-			apital I \$200	(MO/DAY/YR)	>	Φ.	<u>ი</u>	D E		Π Ω	=		۲.
dren, or the purchase or sale of your personal residence, unless it generates rental income. If only a portion of an asset is soid, please so indicate (i.e., "partial sale"). See example below.	HASE	IANGE	Box if C	or Quarterly, Monthly, or			0	0 1-	0	000	01-	,001-	
Capital Gains — if a sales transaction resulted in a capital gain in excess of \$200, check the "capital gains" box and disclose this income on Schedule III.	PURC	EXCH	Check I Gain Ex	Bi-weekly, if applicable	\$1,001- \$15,000	\$15,001- \$50,000 \$50,001-	\$100,000	\$250,00 \$250,00	\$500,00 \$500,00	\$1,000,0	\$5,000,0 \$5,000,0 \$25,000,	\$25,000, \$25,000, \$50,000,	Over \$50,000
JT	<			10 10 11		<		-		+-			
SP Example: Mega Corporation Common Stock (partial sale)	×			10-12-11		×	-	+	╀	╀	-	╁	
Fidolity Fund (Continued)									-		77.4-74		
-Low Priced Stock	×			División S	\times				w				
				day cep					-				
				Bauves+									
- Smell Cap Discovery	X			# Somi	X							1	
				plus Car									
				Remoest									
- Spartan US Equity	×			12-27-12	X			·					
(Coartial Sale)													
- Spartan U.S. Equity				Monthly	X								
				Dividend					-				
				Remirest						<u>-</u>			
- Stratesic Dividend and	X			12-27-12	X								
Income					-								
				or the state of th									

SCHEDULE IV -- TRANSACTIONS

Name James Matheson Page 8 of !!

Report any purchase, sale, or exchange transactions by you, your spouse, or dependent child during the reporting period of any security or real prop-	Type of Transaction	on	Date		<u> </u>		of	Amount of Transaction	actio	3	
resulted in a capital loss. Provide a brief description of any exchange trans- action. Exclude transactions between you, your spouse or dependent chil-		apital I \$200	(MO/DAY/YR)	> 0	0	0	m	71	G	I	
dren, or the purchase or sale of your personal residence, unless it generates rental income. If only a portion of an asset is sold, please so indicate (i.e., "partial sale"). See example below.	HASE	Box if Ca	or Quarterly, Monthly, or)	1-	0	00	00	000	000
Capital Gains — if a sales transaction resulted in a capital gain in excess of \$200, check the "capital gains" box and disclose this income on Schedule III.	PURC	EXCH Check E Gain Ex	Bi-weekly, if applicable	\$1,001- \$15,000 \$15,001-	\$50,000 \$50,001- \$100,000	\$100,00 \$250,000	\$250,00° \$500,000	\$500,00° \$1,000,0	\$1,000,0 \$5,000,0 \$5,000,0	\$25,000, \$25,000,	\$50,000, Over \$50,000,
SP, DC, JT Asset											
Example: Mega Corpor	×		10-12-11	×							
FidelAy Fundy (continued)		·									
JUNIQUE 2015	×		Various	X							
- Export and Multinational	X		Semily Frontally	\times							
			Rainvost								
Northeast Juvestis Trust	×		Questionly	乂							
	•		Reinvest								
Qualcomm Stock	×		Varie	X							
			Reinvost								
TIAA CREFLifecyde 2035	×		12-27-12	X							
(partial sale)											
TIAA CREF Life cycle 2035	×		Semilaly	X							
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SCHEDULE IV— TRANSACTIONS

Report any purchase, sale, or exchange transactions by you, your spouse, or dependent child during the reporting period of any security or real proportions that the property of the land to the l	Ty of Tran	Type of Transaction		Date			Am	ount	<u>o</u>	Amount of Transaction	sacti	9		
resulted in a capital loss. Provide a brief description of any exchange trans- action. Exclude transactions between you, your spouse or dependent chil-			apital \$200	(MO/DAY/YR)	>	8	င	0	т	П	G	I		د
dren, or the purchase or sale of your personal residence, unless it generates rental income. If only a portion of an asset is soid, please so indicate (i.e., "partial sale"). See example below.	CHASE	ANGE	Box if Ca	or Quarterly, Monthly, or	ı	.			91- 90	01-	001- 000	001- 0,000	,001- ,000	0,000
Capital Gains — if a sales transaction resulted in a capital gain in excess of \$200, check the "capital gains" box and disclose this income on Schedule III.		SALE	Check Gain E	Bi-weekly, if applicable	\$1,001- \$15,000	\$15,001 \$50,000	\$50,001 \$100,00	\$100,00 \$250,00	\$250,00 \$500,00	\$500,00 \$1,000,	\$1,000, \$5,000,	\$5,000, \$25,000	\$25,000 \$50,000	Over \$50,000
SP, DC, JT Asset														
Example: Mega Corpo		×		10-12-11		×								_
Vancon touch towns	X			12-27-17	\times									
Trace Tond				Veroù	<u> </u>									
				Dividend					:					
				E.S. 2 7										
Wasatch Micro Cap	X			Monthly	X									
		_				:								

SCHEDULE V- LIABILITIES

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business in which you own an interest (unless you are personally liable); and liabilities owed to a spouse, or the child, parent, or sibling of you or your spouse. Report revolving charge accounts (i.e., credit cards) only if the balance at the close of the preceding calendar year exceeded \$10,000. NOTE: Pending legislation may require Members to report Report liabilities of over \$10,000 owed to any one creditor at any time during the reporting period by you, your spouse, or dependent child. Mark the highest amount owed during the year. Exclude: Any mortgage on your personal residence (unless it is rented out); loans secured by automobiles, household furniture, or appliances; liabilities of a mortgages on personal residences.

		, . 			SP, JT,		
Wells Fargo Home Mortgage			US Bank	Example: First Bank of Wilmington, DE	Creditor		
In 2011			Aug woo	May 1998	Incurred Mo/Year	Date	
In 2011 Mortgage on Personal Personal Personal Personal Personal DC,	Utan.	Risidance, Salt Lake City	Augrovo Mortgage on Personal	Mortgage on 123 Main St., Dover, DE	Type of Liability		
					\$15,000	>	
			-		\$50,000	<u>-</u>	
		, , , ,		×	\$100,000 \$100,001-	<u>ဂ</u>	A
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					\$1,000,001- \$5,000,000	ြ	bility
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				_	\$25,000,001- \$50,000,000	-	
					Over \$50,000,000	٢	

SCHEDULE VI— GIFTS

Exclude: Gifts from relatives, gifts of personal hospitality of an individual, local meals, and gifts to a spouse or dependent child that are totally independent of his or her relationship to you. Gifts with a value of \$140 or less need not be added towards the \$350 disclosure threshold. Report the source, a brief description, and the value of all gifts totalling more than \$350 received by you, your spouse, or a dependent child from any source during the year.

Note: The gift rule (House Rule 25, clause 5) prohibits acceptance of gifts except as specifically provided in the rule

	 		_	_	
			Example: Mr. Joseph H. Smith, Anytown, Anystate	Source	
			Silver Platter (determination on personal friendship received from Committee on Ethics)	Description	
			\$375	Value	
	 	<u> </u>	ــــــــــــــــــــــــــــــــــــــ	السا	

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SCHEDULE VII — TRAVEL PAYMENTS AND REIMBURSEMENTS

or were paid by you and reimbursed by the sponsor. the amount of time, if any, that was not at the sponsor's expense. Disclosure is required regardless of whether the expenses were paid directly by the sponsor you, your spouse, or a dependent child during the reporting period. Indicate whether a family member accompanied the traveler at the sponsor's expense, and Identify the source and list travel itinerary, dates, and nature of expenses provided for travel and travel-related expenses totalling more than \$350 received by

Exclude: Travel-related expenses provided by federal, state, and local governments, or by a foreign government required to be separately reported under the Foreign Gifts and Decorations Act (5 U.S.C. § 7342); political travel that is required to be reported under the Federal Election Campaign Act; travel provided to a

spouse or dependent child that is totally independent of his or her relationship to you

Source	Date(s)	City of Departure—Destination— City of Return	Lodging? (Y/N)	Food? (Y/N)	Was a Family Member Included? (Y/N)	Number of days not at sponsor's expense
Examples: Chicago Chamber of Commerce	Mar. 2	DC—Chicago—DC	z	z	Z	None
	Aug. 6–11	DC—Los Angeles—Cleveland	Υ	Υ	Υ	2 Days
3 A A D	April25	- 4112 gr771185	Iλ	\prec	Y	None
	May).	Dhaka Bangladosh				
	2011	Salt Lake City				